BEHAVIORAL / VIOLENT or COMBATIVE ADMINISTRATIVE ORDER

Initiate immediate supportive care:

O2 to maintain sat \geq 94%

Complete primary and secondary survey as indicated Vital Signs (FSBG and temperature as indicated)

Cardiac Monitor as indicated

Assess for immediate danger:

- Protect yourself and others
- Protect patient from injury
- Summon law enforcement as needed

Inclusion Criteria:

- Suicidal ideation/gesturing
- Danger to self or others
- Petitioned or Court ordered
- Acute psychological complaint

If patient is violent or exhibiting behavior that is dangerous \underline{AND}

EMS provider believes physical restraints may be necessary:

- Restrain all four extremities with either padded leather restraints or soft restraints. Patient must remain in the supine position. Restraints must allow for quick release.
- Reassess and document neurovascular status of all extremities every 15 minutes.
- Do NOT use handcuffs. Handcuffs are for law enforcement use only.
- Do NOT release restraint until transfer of care at hospital.

If patient is violent or exhibiting behavior that is dangerous to their self or the providers:

Administer IV/IM/IN Midazolam (Versed)

- 8 < 14 or > 65 years: 0.1 mg/kg (max dose 2.5 mg), May repeat q5-10 minutes as indicated (max total 5 mg)
- \geq 14 or \leq 65 years: 0.1mg/kg (max dose 5mg), May repeat q5-10 minutes as indicated (max total 10mg)
- \leq 8 years: Contact Medical Direction for orders

If given IN, 1ml per nostril max

Reassess and document:

- Continuous pulse ox, and consider EtCO2 if available
- Vital Signs every 5 minutes
- Patient response (monitor airway)

Patients who verbalize a danger to self or others <u>may NOT</u> refuse care. Law enforcement should be called to scene, if they are not already present, to assist if necessary.

Notification to include:

Behavioral Administrative Order, unit number, Patient age, gender, and ETA to receiving facility.

Advise if patient is Unstable, Uncooperative, or Restrained